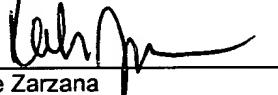


AF/F  
3739P/I/ Notice  
of  
Appeal

## NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Docket No.  
S-3-1

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Assistant Commissioner for Patents, Washington D.C. 20231" on March 10, 2003.

  
Katie Zarzana

In re Application of: RONALD UNDERWOOD et al.

Application Number: 09/512,742 Filed: 02/24/00

For: Methods for Electrosurgical Tissue Contraction Within The Spine

Group Art Unit: 3739 Examiner: L. Cohen

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$320.00

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by half, and the resulting fee is: \$160.00

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

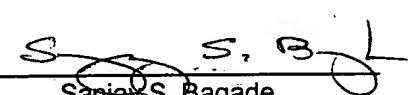
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0359. I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the  applicant/inventor  
 assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)  
 attorney or agent of record.  
 attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

3/10/03

Date

  
Sanjay S. Bagade  
Reg. No. 42,280

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of \_\_\_ forms are submitted.

